

## **Exhibit K**

**W. R. Grace  
Asbestos Personal Injury  
Questionnaire**



RECD JUL 14 2006



10315607111486

RE:

Kazan, McClain, Edises, Simon & Abrams  
171 Twelfth Street, Third Floor  
Oakland CA 94607

REDACTED



000377111486



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IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF DELAWARE



In re: ) Chapter 11  
W. R. GRACE & CO., et al., ) Case No. 01-01139 (JKF)  
Debtors. ) Jointly Administered  
)  
)

# W. R. Grace Asbestos Personal Injury Questionnaire

YOU HAVE RECEIVED THIS QUESTIONNAIRE BECAUSE GRACE BELIEVES THAT YOU HAD SUED ONE OR MORE OF THE DEBTORS LISTED IN APPENDIX A ATTACHED TO THIS QUESTIONNAIRE BEFORE GRACE FILED FOR BANKRUPTCY ON APRIL 2, 2001 FOR AN ASBESTOS-RELATED PERSONAL INJURY OR WRONGFUL DEATH CLAIM, AND THAT CLAIM WAS NOT FULLY RESOLVED.

IF YOU HAVE SUCH A CLAIM, YOU MUST COMPLETE AND SUBMIT THIS QUESTIONNAIRE BY JANUARY 12, 2006 TO RUST CONSULTING, INC., THE CLAIMS PROCESSING AGENT, AT ONE OF THE FOLLOWING ADDRESSES:

IF SENT BY U.S. MAIL

IF SENT BY FEDERAL EXPRESS, UNITED PARCEL SERVICE, OR A SIMILAR HAND DELIVERY SERVICE

RUST CONSULTING, INC.  
CLAIMS PROCESSING AGENT  
RE: W.R. GRACE & CO. BANKRUPTCY  
P.O. BOX 1620  
FARIBAULT, MN 55021

RUST CONSULTING, INC.  
CLAIMS PROCESSING AGENT  
RE: W.R. GRACE & CO. BANKRUPTCY  
201 S. LYNDALE AVE.  
FARIBAULT, MN 55021

A QUESTIONNAIRE (AND ANY AMENDMENTS OR ADDITIONAL DOCUMENTS IN SUPPORT OF THE QUESTIONNAIRE) WILL NOT BE CONSIDERED UNLESS RECEIVED BY RUST CONSULTING, INC. BY JANUARY 12, 2006.

THIS QUESTIONNAIRE IS AN OFFICIAL DOCUMENT APPROVED BY THE COURT IN CONNECTION WITH ESTIMATING GRACE'S ASBESTOS-RELATED PERSONAL INJURY AND WRONGFUL DEATH CLAIMS AS A WHOLE. THE QUESTIONNAIRE IS BEING USED BY W. R. GRACE AS A MEANS TO SEEK INFORMATION ABOUT YOUR ASBESTOS CLAIM. BY TIMELY RETURNING THE QUESTIONNAIRE AS COMPLETELY AND ACCURATELY AS POSSIBLE, GRACE, THE OFFICIAL COMMITTEES, AND THE FUTURE CLAIMANTS REPRESENTATIVE WILL SEEK TO PRIORITIZE THE PROCESSING OF YOUR CLAIM UNDER ANY TRUST DISTRIBUTION PROCEDURES APPROVED AS PART OF A PLAN OF REORGANIZATION.

THE COURT HAS ORDERED THAT, AS PART OF THE DISCOVERY PROCESS, ALL HOLDERS OF PRE-PETITION ASBESTOS PERSONAL INJURY CLAIMS MUST COMPLETE AND RETURN THIS QUESTIONNAIRE. THUS, FAILURE TO TIMELY RETURN THE QUESTIONNAIRE AS COMPLETELY AND ACCURATELY AS POSSIBLE MAY RESULT IN SANCTIONS AND/OR OTHER RELIEF AVAILABLE UNDER APPLICABLE FEDERAL RULES.

BECAUSE YOUR CLAIM WILL BE EVALUATED IN ACCORDANCE WITH THE TRUST DISTRIBUTION PROCEDURES APPROVED AS PART OF A PLAN OF REORGANIZATION, COMPLETION OF THIS QUESTIONNAIRE DOES NOT MEAN THAT YOUR CLAIM WILL EITHER BE ALLOWED OR PAID. TO THE EXTENT YOU ATTACH TO THIS QUESTIONNAIRE DOCUMENTS ALSO NEEDED BY THE TRUST TO PROCESS YOUR CLAIM, SUCH DOCUMENTS WILL BE PROVIDED TO THE TRUST AND YOU WILL NOT NEED TO RESUBMIT THEM.

INSTRUCTIONS.**A. GENERAL**

1. This Questionnaire refers to any lawsuit that you filed before April 2, 2001 for an "asbestos-related wrongful death claim." This term is intended to cover any lawsuit alleging any claim for persons that relates to: (a) exposure to any products or materials containing asbestos that were manufactured, supplied, produced, specified, selected, distributed or in any way marketed by one or more of the Debtors (or any of their respective past or present affiliates, or any of the predecessors of any of the Debtors or any of their respective past or present affiliates), or (b) exposure to vermiculite mined, milled or processed by the Debtors (or any of their respective past or present affiliates, any of the predecessors of any of the Debtors or any of their predecessors' respective past or present affiliates). It includes claims in the nature of or sounding in tort, or under contract, warranty, guarantee, contribution, joint and several liability, subrogation, reimbursement, or indemnity, or any other theory of law or equity, or admiralty for, relating to, or arising out of, resulting from, or attributable to, directly or indirectly, death, bodily injury, sickness, disease, or other personal injuries or other damages caused, or allegedly caused, directly or indirectly, and arising or allegedly arising, directly or indirectly, from acts or omissions of one or more of the Debtors. It includes all such claims, debts, obligations or liabilities for compensatory damages such as loss of consortium, personal or bodily injury (whether physical, emotional or otherwise), wrongful death, survivorship, proximate, consequential, general, special, and punitive damages.
2. Your Questionnaire will be deemed filed only when it has been received by Rust Consulting Inc., the Claims Processing Agent, via U.S. Mail, Federal Express, United Parcel Service or a similar hand delivery service. A Questionnaire that is submitted by facsimile, telecopy or other electronic transmission will not be accepted and will not be deemed filed.

Do not send any Questionnaire to the Debtors, counsel for the Debtors, the Future Claimants Representative, the Official Committee of Unsecured Creditors, the Official Committee of Asbestos Personal Injury Claimants, the Official Committee of Asbestos Property Damage Claimants, the Official Committee of Equity Security Holders, or such Committees' counsel. Questionnaires that are filed with or sent to anyone other than Rust Consulting, Inc. will be deemed not to have been submitted, and such Questionnaires will not be considered.

3. Your completed Questionnaire must (i) be written in English, and (ii) attach relevant supporting materials as instructed further below.
4. All holders of claims described on page i (and as described in further detail in Instruction A (1) above) are required to file this Questionnaire by Jan. 12, 2006. Your Questionnaire will be used in connection with the estimation hearing to be conducted by the Court pursuant to the Estimation Procedures Order (a copy of which is attached as Appendix B).
5. Any subsequent amendment to the Questionnaire will not be considered for any purpose unless received by Jan. 12, 2006.

**B. PART I – Identity of Injured Person and Legal Counsel**

Respond to all applicable questions. If you are represented by a lawyer, then in Part I (b), please provide your lawyer's name and the name, telephone number and address of his/her firm. If you are represented by a lawyer, he/she must assist in the completion of this Questionnaire. Also, if you would prefer that the Debtors send any additional materials only to your lawyer, instead of sending such materials to you, then check the box indicating this in Part I (b).

All references to "you" or the like in Parts I through X shall mean the injured person. If the injured person is deceased, then the executor of the person's will (or similar estate representative) must complete this Questionnaire.

**C. PART II – Asbestos-Related Condition(s)**

Please indicate all asbestos-related medical conditions for which you have been diagnosed. To complete questions related to injuries, medical diagnoses, and/or conditions, please use the following categories of customarily diagnosed conditions:

- Mesothelioma
- Asbestos-Related Lung Cancer
- Other Cancer (colon, laryngeal, esophageal, pharyngeal, or stomach)
- Clinically Severe Asbestosis
- Asbestosis
- Other Asbestos Disease

If you have been diagnosed with multiple conditions and/or if you received diagnoses and diagnostic tests relating to the same condition by multiple doctors, please complete a separate Part II for each initial diagnosis and any previous or subsequent diagnoses or diagnostic tests that change or conflict with the initial diagnosis. For your convenience, additional copies of Part II are attached as Appendix C to this Questionnaire.

**Supporting Documents for Diagnosis:** This Questionnaire must be accompanied by copies, with access to originals upon request, of any and all documents you, your counsel, or your doctors have or subsequently obtain that support or conflict with your diagnosis.

**X-rays and B-reads:** Please attach all x-ray readings and reports. You may, but are not required to, attach chest x-rays. The court, however, has ruled that Grace may seek access to chest x-rays upon request.

**Pulmonary Function Tests:** Please attach all pulmonary function test results, including the actual raw data and all spirometric tracings, on which the results are based.

**D. PART III - Direct Exposure to Grace Asbestos-Containing Products**

In Part III, please provide the requested information for the job and site at which you were exposed to asbestos-containing products. Indicate the dates of exposure to each Grace asbestos-containing product. If your exposure was a result of your employment, use the list of occupation and industry codes below to indicate your occupation and the industry in which you worked at each site. If you allege exposure to Grace asbestos-containing products at multiple sites, the Court has ordered that you must complete a separate Part III for each site. For your convenience, additional copies of Part III are attached as Appendix D to this Questionnaire.

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Attach copies of any and all documents establishing that exposure to Grace asbestos-containing products had a substantial causal role in the development of the disease.

**Occupation Codes**

01. Air conditioning and heating installer/maintenance	31. Iron worker
02. Asbestos miner	32. Joiner
03. Asbestos plant worker/asbestos manufacturing worker	33. Laborer
04. Asbestos removal/abatement	34. Longshoreman
05. Asbestos sprayer/spray gun mechanic	35. Machinist/machine operator
06. Assembly line/factory/plant worker	36. Millwright/mill worker
07. Auto mechanic/bodywork/brake repairman	37. Mixer/bagger
08. Boilermaker	38. Non-asbestos miner
09. Boiler repairman	39. Non-occupational/residential
10. Boiler worker/cleaner/inspector/engineer/installer	40. Painter
11. Building maintenance/building superintendent	41. Pipefitter
12. Brake manufacturer/installer	42. Plasterer
13. Brick mason/layer/hod carrier	43. Plumber - install/repair
14. Burner operator	44. Power plant operator
15. Carpenter/woodworker/cabinetmaker	45. Professional (e.g., accountant, architect, physician)
16. Chipper	46. Railroad worker/carman/brakeman/machinist/conductor
17. Clerical/office worker	47. Refinery worker
18. Construction - general	48. Remover/installer of gaskets
19. Custodian/janitor in office/residential building	49. Rigger/stevedore/seaman
20. Custodian/janitor in plant/manufacturing facility	50. Rubber/tire worker
21. Electrician/inspector/worker	51. Sandblaster
22. Engineer	52. Sheet metal worker/sheet metal mechanic
23. Firefighter	53. Shipfitter/shipwright/ship builder
24. Fireman	54. Shipyard worker (md. repair, maintenance)
25. Flooring installer/tile installer/tile mechanic	55. Steamfitter
26. Foundry worker	56. Steelworker
27. Furnace worker/repairman/installer	57. Warehouse worker
28. Glass worker	58. Welder/blacksmith
29. Heavy equipment operator (includes truck, forklift, & crane)	59. Other
30. Insulator	

**Industry Codes**

001. Asbestos abatement/removal	109. Petrochemical
002. Aerospace/aviation	110. Railroad
100. Asbestos mining	111. Shipyard-construction/repair
101. Automotive	112. Textile
102. Chemical	113. Tire/rubber
103. Construction trades	114. U.S. Navy
104. Iron/steel	115. Utilities
105. Longshore	116. Grace asbestos manufacture or milling
106. Maritime	117. Non-Grace asbestos manufacture or milling
107. Military (other than U.S. Navy)	118. Other
108. Non-asbestos products manufacturing	

**E. PART IV – Indirect Exposure to Grace Asbestos-Containing Products**

In Part IV, please provide the information requested for any injury alleged to have been caused by asbestos-containing products through contact/proximity with another injured person. If you have contact/proximity with multiple injured persons, please complete a separate Part IV for each injured person. For your convenience, additional copies of Part IV are attached as Appendix E to this Questionnaire.

**F. PART V -- Exposure to Non-Grace Asbestos-Containing Products**

In Part V, please provide the requested information for each party against which you have filed a lawsuit and/or claim alleging exposure to asbestos-containing products other than Grace products. If you filed such lawsuits and/or claims against multiple parties, the Court has ordered that you must complete a separate Part V for each party. If exposure was in connection with your employment, use the list of occupation and industry codes in Part III to indicate your occupation and the industry in which you worked. For your convenience, additional copies of Part V are attached as Appendix F to this Questionnaire.

**G. PART VI -- Employment History**

In Part VI, please provide the information requested for each industrial job you have held, other than jobs already listed in Parts III or V. Use the list of occupation and industry codes in the instructions to Part III to indicate your occupation and the industry in which you worked for each job. Please use the copy of Part VI attached as Appendix G to this Questionnaire if additional space is needed.

**H. PART VII -- Litigation and Claims Regarding Asbestos and/or Silica**

In Part VII, please describe any lawsuits and/or claims that were filed by you or on your behalf regarding asbestos or silica.

**I. PART VIII -- Claims by Dependents or Related Persons**

Part VIII is to be completed only by dependents or related persons (such as spouse or child) of an injured person who sued the Debtors before April 2, 2001 for an asbestos-related personal injury or wrongful death claim against Grace not involving physical injury to him-/herself on account of his/her own exposure. One example of such a claim would be a claim for loss of consortium. If you are asserting such a claim, complete the entire Questionnaire, providing all information and documentation regarding the injured person.

**J. PART IX -- Supporting Documentation**

In Part IX, please mark the boxes next to each type of document that you are submitting with this Questionnaire. As indicated in the instructions to Parts II and III, this Questionnaire must be accompanied by copies, with access to originals upon request, of any and all documents you, your counsel, or your doctors have or subsequently obtain that (a) support or conflict with your diagnosis and/or (b) establish exposure to Grace asbestos-containing products as having a substantial causal role in the development of the medical diagnoses, and/or conditions claimed. Original documents provided to Grace will be returned within a reasonable time after its professionals and experts have reviewed the documents.

Grace will reimburse your reasonable expenses incurred in providing (a) copies of depositions you have given in lawsuits in which Grace was not a party and/or (b) any documents you have previously provided to Grace in prior litigation. Please indicate the documents for which you are seeking reimbursement and attach a receipt for such cost.

**K. PART X – Attestation that Information is True, Accurate and Complete**

By signing Part X, you, the injured person, are attesting and swearing, under penalty of perjury, that, to the best of your knowledge, all of the information in this Questionnaire is true, accurate and complete. If the injured person is deceased, then the executor of the person's will (or similar estate representative) must complete and sign Part X on behalf of the injured person.

The legal representative of the injured person must complete and sign Part X where indicated.

**PART I: IDENTITY OF INJURED PERSON AND LEGAL COUNSEL****a. GENERAL INFORMATION****REDACTED**

1. Name of Claimant:

First

MI

Last

2. Gender:  Male  Female3. Race (for purposes of evaluating Pulmonary Function Test results): .....  White/Caucasian African American Other

4. Last Four Digits of Social Security Number:

5. Birth Date:

6. Mailing Address: SEE PART I, b

Address

City

State/Province

Zip/Postal Code

7. Daytime Telephone Number: SEE PART I, b (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_**b. LAWYER'S NAME AND FIRM**1. Name of Lawyer: STEVEN KAZAN2. Name of Law Firm With Which Lawyer is Affiliated: KAZAN, MCCLAIN, ABRAMS, ET. AL.3. Mailing Address of Firm: 171 TWELFTH STREET, OAKLAND, CA 94607

Address

City

State/Province

Zip/Postal Code

4. Law Firm's Telephone Number or Lawyer's Direct Line: ..... (510) 465-7728 Check this box if you would like the Debtors to send subsequent material relating to your claim to your lawyer, in lieu of sending such materials to you.**c. CAUSE OF DEATH (IF APPLICABLE)**1. Is the injured person living or deceased? .....  Living  DeceasedIf deceased, date of death: ..... 03/28/2001

2. If the injured person is deceased, then attach a copy of the death certification to this Questionnaire and complete the following:

Primary Cause of Death (as stated in the Death Certificate): CONGESTIVE HEART FAILUREContributing Cause of Death (as stated in the Death Certificate): MESOTHELIOMA**PART II: ASBESTOS-RELATED CONDITION(S)**

Mark the box next to the conditions with which you have been diagnosed and provide all information required in the instructions to this Questionnaire. If you have been diagnosed with multiple conditions and/or if you received diagnoses and diagnostic tests relating to the same condition by multiple doctors, please complete a separate Part II for each initial diagnosis and any previous or subsequent diagnoses or diagnostic tests that change or conflict with the initial diagnosis. For your convenience, additional copies of Part II are attached as Appendix C to this Questionnaire.

1. Please check the box next to the condition being alleged:

 Asbestos-Related Lung Cancer Mesothelioma Asbestosis Other Cancer (cancer not related to lung cancer or mesothelioma) Other Asbestos Disease Clinically Severe Asbestosis

a. Mesothelioma: If alleging Mesothelioma, were you diagnosed with malignant mesothelioma based on the following (check all that apply):

 diagnosis from a pathologist certified by the American Board of Pathology diagnosis from a second pathologist certified by the American Board of Pathology diagnosis and documentation supporting exposure to Grace asbestos-containing products having a substantial causal role in the development of the condition other (please specify): \_\_\_\_\_

## Part II: ASBESTOS-RELATED CONDITION (Continued)

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## b. Asbestos-Related Lung Cancer: If alleging Asbestos-Related Lung Cancer, were you diagnosed with lung cancer based on the following (check all that apply):

findings by a pathologist certified by the American Board of Pathology

evidence of asbestosis based on a chest x-ray reading of at least 1/1 on the ILO grade scale (a) conducted in compliance with the standards set forth in the International Labour Organization's *2000 International Classification of Radiographs of Pneumoconioses* and (b) by a B-reader certified by the National Institute for Occupational Safety and Health

evidence of asbestosis based on a chest x-ray reading of at least 1/1 on the ILO grade scale (a) conducted in compliance with the standards set forth in the International Labour Organization's *2000 International Classification of Radiographs of Pneumoconioses* and (b) by a second B-reader certified by the National Institute for Occupational Safety and Health

evidence of asbestosis determined by pathology

evidence of asbestos-related nonmalignant disease based on a chest x-ray reading of at least 1/0 on the ILO grade scale (a) conducted in compliance with the standards set forth in the International Labour Organization's *2000 International Classification of Radiographs of Pneumoconioses* and (b) by a B-reader certified by the National Institute for Occupational Safety and Health

evidence of asbestos-related nonmalignant disease based on a chest x-ray reading of at least 1/0 on the ILO grade scale (a) conducted in compliance with the standards set forth in the International Labour Organization's *2000 International Classification of Radiographs of Pneumoconioses* and (b) by a second B-reader certified by the National Institute for Occupational Safety and Health

diffuse pleural thickening as defined in the International Labour Organization's *Guidelines for the Use of the ILO International Classification of Radiographs and Pneumoconioses* (2000)

a supporting medical diagnosis and supporting documentation establishing that exposure to Grace asbestos-containing products had a substantial causal role in the development of the lung cancer

other (please specify): \_\_\_\_\_

## c. Other Cancer:

## (i) If alleging Other Cancer, please mark the box(es) next to the applicable primary cancer(s) being alleged:

colon       pharyngeal       esophageal       laryngeal       stomach cancer

other, please specify: \_\_\_\_\_

## (ii) Were you diagnosed with the above-indicated cancer based on the following (check all that apply):

findings by a pathologist certified by the American Board of Pathology

evidence of asbestosis based on a chest x-ray reading of at least 1/1 on the ILO grade scale (a) conducted in compliance with the standards set forth in the International Labour Organization's *2000 International Classification of Radiographs of Pneumoconioses* and (b) by a B-reader certified by the National Institute for Occupational Safety and Health

evidence of asbestosis based on a chest x-ray reading of at least 1/1 on the ILO grade scale (a) conducted in compliance with the standards set forth in the International Labour Organization's *2000 International Classification of Radiographs of Pneumoconioses* and (b) by a second B-reader certified by the National Institute for Occupational Safety and Health

evidence of asbestosis determined by pathology

a supporting medical diagnosis and supporting documentation establishing that exposure to Grace asbestos-containing products had a substantial causal role in the development of the cancer

other (please specify): \_\_\_\_\_

**PART II: ASBESTOS-RELATED CONDITION(S) (Continued)**

WR GRACE PIQ 60269-0009

d. **Clinically Severe Asbestosis:** If alleging Clinically Severe Asbestosis, was your diagnosis based on the following (check all that apply):

- diagnosis of a pulmonologist or internist certified by the American Board of Internal Medicine
- a chest x-ray reading of at least 2/1 on the ILO grade scale (a) conducted in compliance with the standards set forth in the International Labour Organization's *2000 International Classification of Radiographs of Pneumoconioses* and (b) by a B-reader certified by the National Institute for Occupational Safety and Health
- a chest x-ray reading of at least 2/1 on the ILO grade scale (a) conducted in compliance with the standards set forth in the International Labour Organization's *2000 International Classification of Radiographs of Pneumoconioses* and (b) by a second B-reader certified by the National Institute for Occupational Safety and Health
- asbestosis determined by pathology
- a pulmonary function test, conducted in accordance with the standards set forth in the American Thoracic Society's *Lung Function Testing; Selection of Reference Values and Interpretive Strategies*, demonstrating total lung capacity less than 65% predicted
- a pulmonary function test, conducted in accordance with the standards set forth in the American Thoracic Society's *Lung Function Testing; Selection of Reference Values and Interpretive Strategies*, demonstrating forced vital capacity less than 65% predicted and a FEV1/FVC ratio greater than or equal to 65% predicted
- a supporting medical diagnosis and supporting documentation establishing that exposure to Grace asbestos-containing products had a substantial causal role in the development of the asbestosis
- other (please specify): \_\_\_\_\_

e. **Asbestosis:** If alleging Asbestosis, was your diagnosis based on the following (check all that apply):

- diagnosis of a pulmonologist or internist certified by the American Board of Internal Medicine
- a chest x-ray reading conducted in compliance with the standards set forth in the International Labour Organization's *2000 International Classification of Radiographs of Pneumoconioses* by a B-reader certified by the National Institute for Occupational Safety and Health, with one of the following: (i) at least 1/0 on the ILO grade scale, or (ii) diffuse pleural thickening as defined in the ILO's *Guidelines for the Use of the ILO International Classification of Radiographs and Pneumoconioses* (2000)
- a chest x-ray reading conducted in compliance with the standards set forth in the International Labour Organization's *2000 International Classification of Radiographs of Pneumoconioses* by a second B-reader certified by the National Institute for Occupational Safety and Health, with one of the following: (i) at least 1/0 on the ILO grade scale, or (ii) diffuse pleural thickening as defined in the ILO's *Guidelines for the Use of the ILO International Classification of Radiographs and Pneumoconioses* (2000)
- asbestosis determined by pathology
- a pulmonary function test, conducted in accordance with the standards set forth in the American Thoracic Society's *Lung Function Testing; Selection of Reference Values and Interpretive Strategies*, demonstrating a FEV1/FVC ratio greater than or equal to 65% predicted with either (a) total lung capacity less than 80% predicted or (b) forced vital capacity less than 80% predicted
- a supporting medical diagnosis and supporting documentation establishing that exposure to Grace asbestos-containing products had a substantial causal role in the development of the asbestosis
- other (please specify): \_\_\_\_\_

## PART I: ASBESTOS-RELATED CONDITION(S) (Continued)



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f. Other Asbestos Disease: If alleging any asbestos-related injuries, medical diagnoses, and/or treatments other than those above, was your diagnosis based on the following (check all that apply):

- diagnosis of a pulmonologist or internist certified by the American Board of Internal Medicine
- diagnosis determined by pathology
- a chest x-ray reading conducted in compliance with the standards set forth in the International Labour Organization's *2000 International Classification of Radiographs of Pneumoconioses* by a B-reader certified by the National Institute for Occupational Safety and Health, with one of the following: (i) at least 1/0 on the ILO grade scale, or (ii) diffuse pleural thickening as defined in the ILO's *Guidelines for the Use of the ILO International Classification of Radiographs and Pneumoconioses* (2000)
- a chest x-ray reading conducted in compliance with the standards set forth in the International Labour Organization's *2000 International Classification of Radiographs of Pneumoconioses* by a second B-reader certified by the National Institute for Occupational Safety and Health, with one of the following: (i) at least 1/0 on the ILO grade scale, or (ii) diffuse pleural thickening as defined in the ILO's *Guidelines for the Use of the ILO International Classification of Radiographs and Pneumoconioses* (2000)
- a chest x-ray reading other than those described above
- a pulmonary function test, conducted in accordance with the standards set forth in the American Thoracic Society's *Lung Function Testing; Selection of Reference Values and Interpretive Strategies*, demonstrating a FEV<sub>1</sub>/FVC ratio greater than or equal to 65% predicted with either (a) total lung capacity less than 80% predicted or (b) forced vital capacity less than 80% predicted
- a pulmonary function test other than that discussed above
- a supporting medical diagnosis and supporting documentation establishing that exposure to Grace asbestos-containing products had a substantial causal role in the development of the condition
- a CT Scan or similar testing
- a diagnosis other than those above
- other (please specify): \_\_\_\_\_

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## PART II: ASBESTOS-RELATED CONDITION(S) (Continued)



## 2. Information Regarding Diagnosis

Date of Diagnosis: ..... 04/10/2000Diagnosing Doctor's Name: BEN HARRIMANDiagnosing Doctor's Specialty: PATHOLOGYDiagnosing Doctor's Mailing Address: P.O. BOX 210

Address

CLEARWATERFL33757

City

State/Province

Zip/Postal Code

Diagnosing Doctor's Daytime Telephone Number: UNKNOWN ( )

With respect to your relationship to the diagnosing doctor, check all applicable boxes:

Was the diagnosing doctor your personal physician? .....  Yes  NoWas the diagnosing doctor paid for the diagnostic services that he/she performed? .....  Yes  NoIf yes, please indicate who paid for the services performed: SEE CLAIMANT'S RESPONSES & OBJECTIONS  
(ATTACHED)Did you retain counsel in order to receive any of the services performed by the diagnosing doctor? .....  Yes  NoWas the diagnosing doctor referred to you by counsel? .....  Yes  NoAre you aware of any relationship between the diagnosing doctor and your legal counsel? .....  Yes  No

If yes, please explain: \_\_\_\_\_

Was the diagnosing doctor certified as a pulmonologist or internist by the American Board of Internal Medicine at the time of the diagnosis? .....  Yes  NoWas the diagnosing doctor certified as a pathologist by the American Board of Pathology at the time of the diagnosis? ..... UNKNOWN  Yes  NoWas the diagnosing doctor provided with your complete occupational, medical and smoking history prior to diagnosis? ..... UNKNOWN  Yes  NoDid the diagnosing doctor perform a physical examination? .....  Yes  NoDo you currently use tobacco products? .....  Yes  NoHave you ever used tobacco products? .....  Yes  No

If answer to either question is yes, please indicate whether you have regularly used any of the following tobacco products and the dates and frequency with which such products were used:

 Cigarettes Packs Per Day (half pack = .5) .75 Start Year 1941 End Year 1963 Cigars Cigars Per Day \_\_\_\_\_ Start Year \_\_\_\_\_ End Year \_\_\_\_\_ If Other Tobacco Products, please specify (e.g., chewing tobacco): \_\_\_\_\_

Amount Per Day \_\_\_\_\_ Start Year \_\_\_\_\_ End Year \_\_\_\_\_

Have you ever been diagnosed with chronic obstructive pulmonary disease ("COPD")? .....  Yes  No

If yes, please attach all documents regarding such diagnosis and explain the nature of the diagnosis:

## 3. Information Regarding Chest X-Ray

Please check the box next to the applicable location where your chest x-ray was taken (check one):

 Mobile laboratory  Job site  Union Hall  Doctor office  Hospital  Other: \_\_\_\_\_

Address where chest x-ray taken: \_\_\_\_\_

Address

City

State/Province

Zip/Postal Code

## PART II: ASBESTOS-RELATED CONDITION (Continued)



WR GRACE PIQ 60269-0012

## 4. Information Regarding Chest X-Ray Reading

Date of Reading: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

ILO score: \_\_\_\_\_

Name of Reader: \_\_\_\_\_

Reader's Daytime Telephone Number: .....(\_\_\_\_)\_\_\_\_\_

Reader's Mailing Address: \_\_\_\_\_  
Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

With respect to your relationship to the reader, check all applicable boxes:

Was the reader paid for the services that he/she performed..... Yes  No*If yes, please indicate who paid for the services performed:* \_\_\_\_\_Did you retain counsel in order to receive any of the services performed by the reader? ..... Yes  NoWas the reader referred to you by counsel? ..... Yes  NoAre you aware of any relationship between the reader and your legal counsel? ..... Yes  No*If yes, please explain:* \_\_\_\_\_

Was the reader certified by the National Institute for Occupational Safety and Health at the time of the reading?

..... Yes  No*If the reader is not a certified B-reader, please describe the reader's occupation, specialty, and the method through which the reading was made:* \_\_\_\_\_

## 5. Information Regarding Pulmonary Function Test: .....Date of Test: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

List your height in feet and inches when test given: ..... ft \_\_\_\_\_ inches

List your weight in pounds when test given: ..... lbs

Total Lung Capacity (TLC): ..... % of predicted

Forced Vital Capacity (FVC): ..... % of predicted

FEV1/FVC Ratio: ..... % of predicted

Name of Doctor Performing Test (if applicable): \_\_\_\_\_

Doctor's Specialty: \_\_\_\_\_

Name of Clinician Performing Test (if applicable): \_\_\_\_\_

Testing Doctor or Clinician's Mailing Address: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Testing Doctor or Clinician's Daytime Telephone Number: .....(\_\_\_\_)\_\_\_\_\_

Name of Doctor Interpreting Test: \_\_\_\_\_

Doctor's Specialty: \_\_\_\_\_

Interpreting Doctor's Mailing Address: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Interpreting Doctor's Daytime Telephone Number: .....(\_\_\_\_)\_\_\_\_\_

**PART II: BESTOS-RELATED CONDITION(S) (Continued)**

With respect to your relationship to the doctor or clinician who performed the pulmonary function test, check all applicable boxes:

If the test was performed by a doctor, was the doctor your personal physician? .....  Yes  No

Was the testing doctor and/or clinician paid for the services that he/she performed? .....  Yes  No

*If yes, please indicate who paid for the services performed:* \_\_\_\_\_

Did you retain counsel in order to receive any of the services performed by the testing doctor or clinician? ..  Yes  No

Was the testing doctor or clinician referred to you by counsel? .....  Yes  No

Are you aware of any relationship between either the doctor or clinician and your legal counsel? .....  Yes  No

*If yes, please explain:* \_\_\_\_\_

Was the testing doctor certified as a pulmonologist or internist by the American Board of Internal Medicine at the time of the pulmonary function test? .....  Yes  No

With respect to your relationship to the doctor interpreting the results of the pulmonary function test check all applicable boxes:

Was the doctor your personal physician? .....  Yes  No

Was the doctor paid for the services that he/she performed? .....  Yes  No

*If yes, please indicate who paid for the services performed:* \_\_\_\_\_

Did you retain counsel in order to receive any of the services performed by the doctor? .....  Yes  No

Was the doctor referred to you by counsel? .....  Yes  No

Are you aware of any relationship between the doctor and your legal counsel? .....  Yes  No

*If yes, please explain:* \_\_\_\_\_

Was the doctor interpreting the pulmonary function test results certified as a pulmonologist or internist by the American Board of Internal Medicine at the time the test results were reviewed? .....  Yes  No

#### 6. Information Regarding Pathology Reports:

Date of Pathology Report: ..... 10/20/2000

Findings: MALIGNANT MESOTHELIOMA

Name of Doctor Issuing Report: WILLIAM R. SALYER, MD

Doctor's Specialty: PATHOLOGY

Doctor's Mailing Address: 2450 ASHBY AVE

Address BERKELEY

CA

94705

City

State/Province

Zip/Postal Code

Doctor's Daytime Telephone Number: ..... (510) 644-0951

With respect to your relationship to the doctor issuing the pathology report, check all applicable boxes:

Was the doctor your personal physician? .....  Yes  No

Was the doctor paid for the services that he/she performed? .....  Yes  No

*If yes, please indicate who paid for the services performed:* CLAIMANT & CLAIMANT'S COUNSEL

Did you retain counsel in order to receive any of the services performed by the doctor? .....  Yes  No

Was the doctor referred to you by counsel? .....  Yes  No

Are you aware of any relationship between the doctor and your legal counsel? .....  Yes  No

*If yes, please explain:* \_\_\_\_\_

Was the doctor certified as a pathologist by the American Board of Pathology at the time of the diagnosis?

.....  Yes  No

**PART I: ASBESTOS-RELATED CONDITION(S) (Continued)**

7. With respect to the condition alleged, have you received medical treatment from a doctor for WR GRACE PIQ 60269-0014  
.....  Yes  No

If yes, please complete the following:

Name of Treating Doctor: ROBERT MC CREADY, MD

Treating Doctor's Specialty: ONCOLOGY

Treating Doctor's Mailing Address: 303 PINELLAS ST, STE 230  
Address

CLEARWATER

FL

33756

City

State/Province

Zip/Postal Code

Treating Doctor's Daytime Telephone number: .....(727)442-4188

Was the doctor paid for the services that he/she performed? .....  Yes  No

If yes, please indicate who paid for the services performed:

Did you retain counsel in order to receive any of the services performed by the doctor? .....  Yes  No

[REMAINDER OF PAGE INTENTIONALLY BLANK]

**PART III: DIRECT EXPOSURE TO GRACE ASBESTOS-CONTAINING PRODUCTS**

Please complete the chart below for each site at which you allege exposure to Grace asbestos-containing products. If you allege exposure at multiple sites, the Court has ordered that you must complete a separate chart for each site. For your convenience, additional copies of Part III are attached as Appendix D to this Questionnaire.

If exposure was in connection with your employment, use the list of occupation and industry codes in the Instructions to Part III to indicate your occupation and the industry in which you worked. In the "Nature of Exposure" column, for each job listed, please indicate the letter(s) corresponding to whether you were any of the following during your exposure:

- (a) A worker who personally mixed Grace asbestos-containing products
- (b) A worker who personally removed or cut Grace asbestos-containing products
- (c) A worker who personally installed Grace asbestos-containing products
- (d) A worker at a site where Grace asbestos-containing products were being installed, mixed, removed or cut by others
- (e) A worker in a space where Grace asbestos-containing products were being installed, mixed, removed or cut by others
- (f) If other, please specify: \_\_\_\_\_

**Site of Exposure:**Site Name: UNIVERSITY OF FLORIDALocation: GAINESVILLE, FLSite Type:  Residence  BusinessSite Owner: STATE OF FLORIDAEmployer During Exposure: UNIV OF FLORIDA Unions of which you were a member during your employment: UNKNOWN

Product(s)	Basis for Identification of Each Grace Product	Dates and Frequency (hours/day, days/year)	Occupation Code <i>If Code 59, specify:</i>	Industry Code <i>If Code 118, specify:</i>	Was exposure due to working in or around areas where product was being installed, mixed, removed, or cut? <i>If Yes, please indicate your regular proximity to such areas</i>	Nature of Exposure
Zonolite	GOOD FAITH BELIEF	5/65 - 5/67	33	118 SCHOOL	YES, IN REGULAR PROXIMITY AT	D AND/OR E
ZENDURE	BASED ON INDUSTRY'S PATTERNS & PRACTICES	5/68 - 12/68	33	118 SCHOOL	VARIABLE DISTANCES AT	D AND/OR E
Job 3 Description:					DIFFERENT TIMES DURING	
Job 4 Description:					EMPLOYMENT AT SITE	
Job 5 Description:						
Job 6 Description:						

WR GRACE PIQ 60269-0015

**PART IV: INDIRECT EXPOSURE TO GRACE ASBESTOS-CONTAINING PR**

1. Are you asserting an injury caused by exposure to Grace asbestos-containing products through another injured person? .....  Yes  No

*If yes, complete questions 2 through 10 of this section for each injured person through which you allege exposure to Grace asbestos-containing products. For your convenience, additional copies of Part IV are attached as Appendix E to this Questionnaire.*

2. Please indicate the following information regarding the other injured person:

Name of Other Injured Person: \_\_\_\_\_ Gender:  Male  Female

Last Four Digits of Social Security Number: \_\_\_\_\_ Birth Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

3. What is your Relationship to Other Injured Person: .....  Spouse  Child  Other

4. Nature of Other Injured Person's Exposure to Grace Asbestos-Containing Products:

\_\_\_\_\_

5. Dates Other Injured Person was Exposed to Grace Asbestos-Containing Products:

From: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

6. Other Injured Person's Basis for Identification of Asbestos-Containing Product as Grace Product:

\_\_\_\_\_

7. Has the Other Injured Person filed a lawsuit related to his/her exposure? .....  Yes  No

*If yes, please provide caption, case number, file date, and court name for the lawsuit:*

Caption: \_\_\_\_\_

Case Number: \_\_\_\_\_ File Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Court Name: \_\_\_\_\_

8. Nature of Your Own Exposure to Grace Asbestos-Containing Product:

\_\_\_\_\_

9. Dates of Your Own Exposure to Grace Asbestos-Containing Product:

From: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

10. Your Basis for Identification of Asbestos-Containing Product as Grace Product:

\_\_\_\_\_

[REMAINDER OF PAGE INTENTIONALLY BLANK]

**PART V: EXPOSURE TO NON-GRACE ASBESTOS-CONTAINING PRODUCTS**

Please complete the chart below for each party against which you have filed a lawsuit and/or claim alleging exposure to asbestos-containing products other than Grace products. If you filed such lawsuits and/or claims against multiple parties, the Court has ordered that you must complete a separate chart for each party. For your convenience, additional copies of Part V are attached as Appendix P to this Questionnaire.

If exposure was in connection with your employment, use the list of occupation and industry codes in the Instructions to Part III to indicate your occupation and the industry in which you worked.

In the "Nature of Exposure" column, for each product listed, please indicate the letter(s) corresponding to whether you were any of the following during your exposure:

- (a) A worker who personally mixed Non-Grace asbestos-containing products
- (b) A worker who personally removed or cut Non-Grace asbestos-containing products
- (c) A worker who personally installed Non-Grace asbestos-containing products
- (d) A worker at a site where Non-Grace asbestos-containing products were being installed, mixed, removed or cut by others
- (e) A worker in a space where Non-Grace asbestos-containing products were being installed, mixed, removed or cut by others
- (f) If other, please specify.

Party Against Which Lawsuit or Claim was Filed:		Product(s)	Dates and Frequency of Exposure (hours/day, days/year)	Occupation Code If Code 59, specify.	Industry Code If Code 118, specify.	Was exposure due to working in or around areas where product was being installed, mixed, removed, or cut? <i>If Yes, please indicate your regular proximity to such areas</i>	Nature of Exposure
<b>Site of Exposure 1</b>		Job 1 Description:					
Site Name:		Job 2 Description:					
Address:		Job 3 Description:					
City and State:							
Site Owner:							
<b>Site of Exposure 2</b>		Job 1 Description:					
Site Name:		Job 2 Description:					
Address:		Job 3 Description:					
City and State:							
Site Owner:							
<b>Site of Exposure 3</b>		Job 1 Description:					
Site Name:		Job 2 Description:					
Address:		Job 3 Description:					
City and State:							
Site Owner:							

WR GRACE PIQ 60269-0017

**PART VI: EMPLOYMENT HISTORY**


Other than jobs listed in Part III or V, please complete this Part VI for all of your prior industrial employment, including your current employment. For each job, include your employer, location of employment, and dates of employment. Only include jobs at which you worked for at least one month. Please use the copy of Part VI attached as Appendix G to this Questionnaire if additional space is needed.

**Occupation Code:** \_\_\_\_\_ If Code 59, specify: \_\_\_\_\_

**Industry Code:** \_\_\_\_\_ If Code 118, specify: \_\_\_\_\_

**Employer:** \_\_\_\_\_

**Beginning of Employment:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      **End of Employment:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Location:** \_\_\_\_\_  
Address \_\_\_\_\_

<b>City</b>	<b>State/Province</b>	<b>Zip/Postal Code</b>
-------------	-----------------------	------------------------

**Occupation Code:** \_\_\_\_\_ If Code 59, specify: \_\_\_\_\_

**Industry Code:** \_\_\_\_\_ If Code 118, specify: \_\_\_\_\_

**Employer:** \_\_\_\_\_

**Beginning of Employment:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      **End of Employment:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Location:** \_\_\_\_\_  
Address \_\_\_\_\_

<b>City</b>	<b>State/Province</b>	<b>Zip/Postal Code</b>
-------------	-----------------------	------------------------

**Occupation Code:** \_\_\_\_\_ If Code 59, specify: \_\_\_\_\_

**Industry Code:** \_\_\_\_\_ If Code 118, specify: \_\_\_\_\_

**Employer:** \_\_\_\_\_

**Beginning of Employment:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      **End of Employment:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Location:** \_\_\_\_\_  
Address \_\_\_\_\_

<b>City</b>	<b>State/Province</b>	<b>Zip/Postal Code</b>
-------------	-----------------------	------------------------

**Occupation Code:** \_\_\_\_\_ If Code 59, specify: \_\_\_\_\_

**Industry Code:** \_\_\_\_\_ If Code 118, specify: \_\_\_\_\_

**Employer:** \_\_\_\_\_

**Beginning of Employment:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      **End of Employment:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Location:** \_\_\_\_\_  
Address \_\_\_\_\_

<b>City</b>	<b>State/Province</b>	<b>Zip/Postal Code</b>
-------------	-----------------------	------------------------

**PART VII: LITIGATION AND CLAIMS REGARDING ASBESTOS AND/OR SILICA**

WR GRACE PIQ 60269-0019

**a. LITIGATION**

1. Have you ever been a plaintiff in a lawsuit regarding asbestos or silica? .....  Yes  No

*If yes, please complete the rest of this Part VII(a) for each lawsuit. For your convenience, additional copies of Part VII are attached as Appendix G to this Questionnaire*

2. Please provide the caption, case number, file date, and court name for the lawsuit you filed:

Caption:

Case Number:

REDACTED

File Date:

REDACTED

Court Name:

3. Was Grace a defendant in the lawsuit? .....  Yes  No

4. Was the lawsuit dismissed against any defendant? .....  Yes  No

*If yes, please provide the basis for dismissal of the lawsuit against each defendant:*

---



---

5. Has a judgment or verdict been entered? .....  Yes  No

*If yes, please indicate verdict amount for each defendant(s):* \_\_\_\_\_

6. Was a settlement agreement reached in this lawsuit? .....  Yes  No

*If yes and the settlement was reached on or after April 2, 2001, please indicate the following:*

- a. Settlement amount for each defendant: \_\_\_\_\_
- b. Applicable defendants: \_\_\_\_\_
- c. Disease or condition alleged: \_\_\_\_\_
- d. Disease or condition settled (if different than disease or condition alleged): \_\_\_\_\_

7. Were you deposed in this lawsuit? .....  Yes  No

*If yes and Grace was not a party in the lawsuit, please attach a copy of your deposition to this Questionnaire*

**b. CLAIMS**

1. Have you ever asserted a claim regarding asbestos and/or silica, including but not limited to a claim against an asbestos trust (other than a formal lawsuit in court)? .....  Yes  No

*If yes, please complete the rest of this Part VII(b). If no, please skip to Part VIII.*

2. Date the claim was submitted: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

3. Person or entity against whom the claim was submitted: \_\_\_\_\_

4. Description of claim: \_\_\_\_\_

5. Was claim settled? .....  Yes  No

6. Please indicate settlement amount: ..... \$ \_\_\_\_\_

7. Was the claim dismissed or otherwise disallowed or not honored? .....  Yes  No

*If yes, provide the basis for dismissal of the claim:* \_\_\_\_\_

**PART VII: LITIGATION AND CLAIMS REGARDING ASBESTOS AND/OR****a. LITIGATION**

1. Have you ever been a plaintiff in a lawsuit regarding asbestos or silica? .....  Yes  No

*If yes, please complete the rest of this Part VII(a) for each lawsuit. For your convenience, additional copies of Part VII are attached as Appendix G to this Questionnaire*

2. Please provide the caption, case number, file date, and court name for the lawsuit you filed:

Caption:

Case Number: REDACTED File Date: REDACTED

Court Name:

3. Was Grace a defendant in the lawsuit? .....  Yes  No

4. Was the lawsuit dismissed against any defendant? .....  Yes  No

*If yes, please provide the basis for dismissal of the lawsuit against each defendant:*

---



---

5. Has a judgment or verdict been entered? .....  Yes  No

*If yes, please indicate verdict amount for each defendant(s):*

---

6. Was a settlement agreement reached in this lawsuit? .....  Yes  No

*If yes and the settlement was reached on or after April 2, 2001, please indicate the following:*

- a. Settlement amount for each defendant: \_\_\_\_\_
- b. Applicable defendants: \_\_\_\_\_
- c. Disease or condition alleged: \_\_\_\_\_
- d. Disease or condition settled (if different than disease or condition alleged): \_\_\_\_\_

7. Were you deposed in this lawsuit? .....  Yes  No

*If yes and Grace was not a party in the lawsuit, please attach a copy of your deposition to this Questionnaire.*

**b. CLAIMS**

1. Have you ever asserted a claim regarding asbestos and/or silica, including but not limited to a claim against an asbestos trust (other than a formal lawsuit in court)? .....  Yes  No

*If yes, please complete the rest of this Part VII(b). If no, please skip to Part VIII.*

2. Date the claim was submitted: ..... / /

3. Person or entity against whom the claim was submitted: \_\_\_\_\_

4. Description of claim: \_\_\_\_\_

5. Was claim settled? .....  Yes  No

6. Please indicate settlement amount: ..... \$ \_\_\_\_\_

7. Was the claim dismissed or otherwise disallowed or not honored? .....  Yes  No

*If yes, provide the basis for dismissal of the claim:*

**PART VIII: CLAIMS BY DEPENDENTS OR RELATED PERSONS****REDACTED**

Name of Dependent or Related Person:

Gender

Last Four Digits of Social Security Number:

Birth Date:

Financially Dependent: .....  Yes  NoRelationship to Injured Party:  Spouse  Child  Other If other, please specify \_\_\_\_\_Mailing Address: SEE PART I, b  
Address

City

State/Province

Zip/Postal Code

Daytime Telephone number: ..... SEE PART I, b ..... ( ) \_\_\_\_\_ - \_\_\_\_\_**PART IX: SUPPORTING DOCUMENTATION**

Please use the checklists below to indicate which documents you are submitting with this form.

Copies:

<input checked="" type="checkbox"/> Medical records and/or report containing a diagnosis	<input type="checkbox"/> X-rays
<input type="checkbox"/> Lung function test results	<input type="checkbox"/> X-ray reports/interpretations
<input type="checkbox"/> Lung function test interpretations	<input type="checkbox"/> CT scans
<input checked="" type="checkbox"/> Pathology reports	<input type="checkbox"/> CT scan reports/interpretations
<input checked="" type="checkbox"/> Supporting documentation of exposure to Grace asbestos-containing products ( <u>INTERROGATORIES</u> )	<input checked="" type="checkbox"/> Depositions from lawsuits indicated in Part VII of this Questionnaire ( <u>CAPTION PAGES ONLY</u> )
<input type="checkbox"/> Supporting documentation of other asbestos exposure <u>AND ADDITIONAL SUPPORTING DOCUMENTATION</u>	<input checked="" type="checkbox"/> Death Certification

Originals:

<input type="checkbox"/> Medical records and/or report containing a diagnosis	<input type="checkbox"/> Supporting documentation of other asbestos exposure
<input type="checkbox"/> Lung function test results	<input type="checkbox"/> X-rays
<input type="checkbox"/> Lung function test interpretations	<input type="checkbox"/> X-ray reports/interpretations
<input type="checkbox"/> Pathology reports	<input type="checkbox"/> CT scans
<input type="checkbox"/> Supporting documentation of exposure to Grace asbestos-containing products	<input type="checkbox"/> CT scan reports/interpretations
	<input type="checkbox"/> Death Certification

Grace will reimburse your reasonable expenses incurred in providing (a) copies of depositions you have given in lawsuits in which Grace was not a party and/or (b) any documents you have previously provided to Grace in prior litigation. Please indicate the documents for which you are seeking reimbursement and attach a receipt for such costs:

**PART X: ATTESTATION THAT INFORMATION IS TRUE AND ACCURATE**

The information provided in this Questionnaire must be accurate and truthful. This Questionnaire is an official court document that may be used as evidence in any legal proceeding regarding your Claim. The penalty for presenting a fraudulent Questionnaire is a fine of up to \$500,000 or imprisonment for up to five years, or both. 18 U.S.C. §§ 152 & 3571.  
**TO BE COMPLETED BY THE INJURED PERSON.**

I swear, under penalty of perjury, that, to the best of my knowledge, all of the foregoing information contained in this Questionnaire is true, accurate and complete.

Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Please Print Name: \_\_\_\_\_

**TO BE COMPLETED BY THE LEGAL REPRESENTATIVE OF THE INJURED PERSON.**

I swear that, to the best of my knowledge, all of the information contained in this Questionnaire is true, accurate and complete.

Signature: \_\_\_\_\_

Date: 07/10/2006

Please Print Name: STEVEN KAZAN



# Medical Reports



October 20, 2000

Mr. Francis E. Fernandez  
Kazan, McClain, Edises, Simon and Abrams  
171 Twelfth Street, Third Floor  
Oakland, California 94607

RE: **REDACTED**

Dear Mr. Fernandez

I have reviewed the medical records and pathology materials provided in the above case. The medical records consisted of pathology reports only. In January, 1999, the patient was evaluated at St. Joseph's Regional Health Center, Hot Springs, Arkansas. He was a 75 year-old man with a history of recurrent pneumothorax. A wedge biopsy of a left lung bleb was described as showing a papillary, glandular proliferation consistent with low-grade adenocarcinoma. A mucin histochemical stain was negative. On March 31, 2000, at Morton Plant Hospital, Clearwater, Florida, a left pleural fluid cytologic study revealed malignant cells. A calretinin immunohistochemical study was positive. Immunohistochemical studies CEA and CD15 were negative. On May 1, 2000, both of the above samples were reviewed in consultation at the Armed Forces Institute of Pathology. The wedge biopsy of the left lung was felt to show epithelioid mesothelioma. Immunohistochemical studies keratin and calretinin were positive. Immunohistochemical studies CEA, LeuM1, B72.3, and BerEP4 were negative. The pleural fluid cytologic study was interpreted as revealing atypical mesothelial proliferation, consistent with mesothelioma if appropriate radiologic and clinical data were supportive. On August 31, 2000, at Morton Plant Hospital, open biopsies of the pleura were described as showing malignant mesothelioma. A calretinin immunohistochemical study was positive. A mucin histochemical was negative, as were immunohistochemical studies CEA, CD15, and TTF-1.

The pathology materials provided and my diagnoses:

1. St. Joseph's Regional Health Center, S-256-99, 14 slides

Left lung, wedge biopsy:

- Malignant epithelioid mesothelioma
- Negative histochemical study mucin
- Negative immunohistochemical studies CEA, CD15, and TTF-1
- 0 asbestos bodies in 0.5 square cm.
- Emphysema



October 20, 2000

Mr. Francis E. Fernandez

RE:

Page Two

**REDACTED**

Left lung nodule, biopsy:

- Organizing hematoma
- Focal, atypical mesothelial proliferation

2. Morton Plant Hospital, P-00-468, 19 slides

Left pleural fluid:

- Malignant epithelioid mesothelioma
- Positive immunohistochemical study calretinin
- Negative histochemical study mucin
- Negative immunohistochemical studies CEA and CD15

3. Morton Plant Hospital, S-00-12280, 13 slides

Pleura, open biopsies:

- Malignant epithelioid mesothelioma
- Positive immunohistochemical studies CK7, HBME-1, and calretinin
- Negative histochemical study PASD
- Negative immunohistochemical studies CEA, LeuM1, B72.3, BerEP4, and CK5/6

The patient has malignant mesothelioma of the pleura. The morphologic appearance of the neoplasm is characteristic. The results of the histochemical and immunohistochemical studies strongly support the diagnosis of mesothelioma. No asbestos bodies were identified in the small quantity of lung tissue included in the wedge biopsy of the left lung performed at St. Joseph's Health Center. The quantity of lung tissue available is insufficient for estimation of the asbestos-body concentration in the lung parenchyma.

Sincerely

A handwritten signature in black ink, appearing to read "William R. Salyer".

William R. Salyer, M.D.

WRS/w



CLEARWATER PATHOLOGY ASSOCIATES

P.O. BOX 210  
CLEARWATER, FLORIDA 33757-0210

BEN HARRIMAN, M.D.  
GEORGE D. SCHAEFER, M.D.  
MICHAEL R. PIEHL, M.D.  
KENNETH R. SCHROER, M.D.  
DIPLOMATES OF THE AMERICAN  
BOARD OF PATHOLOGY

~~April 10, 2000.~~

Greg Savel, M.D.  
1230 S. Myrtle Ave.  
Suite 205  
Clearwater, FL 33756

REDACTED

Dear Dr. Savel,

This letter will formalize our findings related to the father of one of your employees, the former being age 77.

I received a left pleural fluid for examination (P-468) which was collected 03/32/00. I enclose a copy of my findings, which was consistent with a mesothelioma.

At our later discussion about this, last week, you offered to retrieve for me a paraffin block of a previous biopsy from (see enclosure - a left lung nodule, January 12, 1999, St. Joseph's Regional Health Center, S-256-1):

There is a slight blush with TTF, Calretinin was technically unsatisfactory and the epithelial markers (LEU-M1 and CEA) were negative.

I believe this tumor is mesothelioma.

I am enclosing all pertinent slides, data and the paraffin block.

Best wishes,

Ben Harriman, M.D.

MORTON PLANT HOSPITAL  
323 JEFFORDS STREET  
CLEARWATER, FL 33756  
(727) 462-7062



Date Received: 08/31/00  
Date of Procedure: 08/30/00

REDACTED

S-00-012280

Surgical Pathology

GROSS:

Received are multiple portions of red-tan to dark red soft tissue and some yellow-gray fibrofatty tissue. The specimen measures 8.0 x 7.5 x 3.0 cm in aggregate. On section, the tissue is gray-tan to gray-white, and partially cystic, containing red-tan to yellow-tan mucinous fluid. rh/f

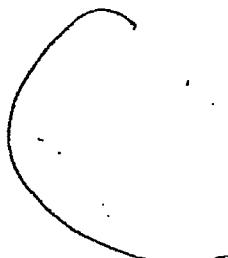
MICRO:

Sections of the pleural tumor show an infiltrating tubulopapillary malignant tumor with well formed glands. Special stains for CD-15, CEA, Calretinin, TTF-1, and Mucin are performed. Calretinin, a mesothelial marker, is strongly positive, while CEA, CD-15, TTF-1 and Mucin are negative.

DIAGNOSIS:

Pleura, biopsy: Malignant tubulopapillary mesothelioma. ✓

KENNETH R. SCHROER, M.D.  
PATHOLOGIST  
KS : DAM  
Date Reported: 09/05/00



REDACTED

End of Report

S-00-012280

cc:McCreary, Robert.H

0000090335921 / (11000)000-000944651  
M/ 05/09/1923 MED/ WIT7 /0705 -01  
Dr: Chapa, Liberato  
Doctors Box #: 0001425



# Interrogatory Responses

WR GRACE PIQ 60289-0028

1 Francis E. Fernandez, Esq. (C.S.B. #65775)  
2 Gordon D. Greenwood, Esq. (C.S.B.# 136097)  
2 KAZAN, McClain, EDISES, SIMON & ABRAMS  
A Professional Law Corporation  
3 171 Twelfth Street, Third Floor  
Oakland, California 94607  
4 Telephone: (510) 465-7728  
5 Attorneys for Plaintiffs

6

7

8 IN THE SUPERIOR COURT OF THE STATE OF CALIFORNIA

9 IN AND FOR THE COUNTY OF ALAMEDA

10

11 REDACTED

No. 2001-025329

12

13 RESPONSES TO JOINT DEFENSE  
14 INTERROGATORIES  
(Wrongful Death)

15

Plaintiffs,

16

vs.

17

A. P. GREEN SERVICES, INC., et al.,

18

Defendants.

19

PROPOUNDING PARTY: Coordinating Defense Counsel, Berry & Berry

20

SET NUMBER: ONE (1)

21

RESPONDING PARTY: Plaintiff

22

Plaintiff hereby responds to interrogatories propounded by  
Coordinating Defense Counsel, Berry & Berry.

23

INTRODUCTION

24

These responses include language drafted by plaintiffs' attorneys. As a result, some or all of these responses may contain wording that plaintiffs might not use. The responses that follow are based on information possessed by plaintiffs' attorneys, unless otherwise privileged, as well as information known to plaintiffs. Plaintiffs may not have any information concerning a particular

REDACTED

KAZAN, McClain,  
EDISES, SIMON &  
ABRAMS  
A PROFESSIONAL  
LAW CORPORATION  
171 TWELFTH STREET  
THIRD FLOOR  
OAKLAND, CA 94607  
(510) 465-7728  
(510) 893-2113  
FAX (510) 895-4013

**REDACTED**

1 response. Verification by plaintiff  
2 any knowledge concerning any particular response.

is not an in:   
WR GRACE PIQ 60269-0029

3 **RESPONSE TO INTERROGATORY NO. 1:**

4 (a)  
5 (b)  
6 (c)  
7 (d)  
8 (e)  
9 (f) **REDACTED**  
10 (g)  
11 (h)  
12 (i)  
13 (j)  
14 (k)  
15 (l)  
16 (m)  
17 (n)

cause it is an invasion of privacy, irrelevant and  
not likely to lead to admissible evidence. Without waiving these objections, plaintiff responds:

19 Plaintiff has not remarried since her husband's death;

20 (o)  
21 (p) Not applicable; **REDACTED**  
22 (q) Not applicable; and  
23 (r) Death; March 28, 2001; Clearwater, FL.

24 **RESPONSE TO INTERROGATORY NO. 2:**

25 (a)  
26 (b) **REDACTED**  
27 (c)  
28 (d)

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1 (e)  
2 (f)  
3 (g)  
4 (h)  
5 (i)  
6 (j)  
7 (k) REDACTED  
8 (l)  
9 (m)  
10 (n)  
11 (o)  
12 (p)  
13 (q)  
14 (r)  
15 (s)  
16 (t)

17 **RESPONSE TO INTERROGATORY NO. 3:**

18 Name and Address Date of Birth Occupation

19 REDACTED  
20  
21  
22

23 **RESPONSE TO INTERROGATORY NO. 4:**

24 No.

25 **RESPONSE TO INTERROGATORY NO. 5:**

26 Mother

27 (a)  
28 (b) REDACTED  
(c)

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1 Father

2 (a)

3 (b) **REDACTED**

4 (c)

5 **RESPONSE TO INTERROGATORY NO. 6:**

6 Plaintiff objects to this interrogatory because it is burdensome, oppressive, vague and  
7 ambiguous as to what constitutes "blood relatives," is not likely to lead to admissible evidence.

8 Without waiv: follows: Yes

9 (a) **REDACTED**

10 (b)

11 **RESPONSE TO INTERROGATORY NO. 7:**

12 (a)

13 (b)

14 (c) **REDACTED**

15 (d)

16 (e)

17 **RESPONSE TO INTERROGATORY NO. 8:**

18 Plaintiff objects to this interrogatory because it is overbroad, irrelevant to the subject  
19 matter of the instant action, not likely to lead to admissible evidence, and is an invasion of  
20 plaintiff's right to privacy. Furthermore, *Smith v. Superior Court* (1961) 189 Cal.App.2d 6, is a  
21 case on point concerning this subject. Without waiving said objections, plaintiff responds: At the  
22 time of his death, decedent lived at

23 **RESPONSE TO INTERROGATORY NO. 9:** **REDACTED**

24 Decedent completed 8<sup>th</sup> grade at Pleasant Hill School, Pleasant Hill, AR. He then attended  
25 Thomas Jefferson Jr. High and Plant High School, in Tampa, FL. Decedent earned his GED while  
26 in the USAF. Other classes he took were: Military Leadership School 1951 at Brookly AFB,  
27 Mobile, AL.; The NCO Academy in 1955 at Tindall AFB, Panama City, FL; and diesel  
28 maintenance in 1956 at Nordberg Manufacturing Company, Milwaukee, WI.

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WR GRACE PIQ 60289-0032

1 **RESPONSE TO INTERROGATORY NO. 10:**

2 Plaintiff objects to this interrogatory because it is irrelevant to the subject matter of the  
 3 action and not likely to lead to admissible evidence (as to the decedent). As to the plaintiff: No.

4 **RESPONSE TO INTERROGATORY NO. 11:**

5 Plaintiff objects to the final part of this interrogatory, "If decedent was not a member of the  
 6 Armed Forces . . .," because it is overbroad and an invasion of decedent's right to privacy.  
 7 Without waiving said objections, plaintiff responds as follows: Decedent served as a seaman and  
 8 boson's mate (First Class) in the U.S. Navy from June 4, 1942 until November 1947, and then  
 9 served in the U.S. Air Force as a boatmaster from June 1948, and Sergeant from 1951 until his  
 10 retirement April 30, 1963.

11 Plaintiff refers defendants to her response to Interrogatory No. 30 below for details  
 12 regarding decedent's job duties during his active duty in the Armed Forces.

13 **RESPONSE TO INTERROGATORY NO. 12:**

14 Plaintiff objects to this interrogatory because it is overbroad, burdensome and an invasion  
 15 of the right to privacy. Further, defendants have relevant medical records or plaintiff's attorney  
 16 will make relevant medical records available at a mutually convenient time in our office for the  
 17 defendants' coordinating counsel for medical discovery, Berry & Berry. Without waiving said  
 18 objections, plaintiff responds as follows:-

19	<u>Doctor/Hospital/Address</u>	<u>Date of Treatment</u>
20	Robert McCreary, M.D. Florida Community Cancer Centers 21 303 Pinellas St, Ste 230 Clearwater, FL 33756	May 2000 to death
<u>Reason for Treatment:</u> Mesothelioma		
22	Scott J. Antonio, M.D. H. Lee Moffitt Cancer Center 12902 Magnolia Dr. Tampa, FL 33612	April 2000, August 2000
<u>Reason for Treatment:</u> Mesothelioma, pleurodesis		
27	Bonnie Glisson, M.D. Anderson Cancer Center University of Texas 1515 Holcombe Blvd	July 2000

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1 Houston, TX 77030

2 Reason for Treatment: Mesothelioma3 Robert D. Johnson, M.D.  
Pulmonary Medicine

June 2000

4 One Mercy Lane, Suite 401  
Hot Springs, AR 719135 Reason for Treatment: Mesothelioma6 Brian G. Salisbury, M.D.  
510 E. Druid Rd, Ste. A  
Clearwater, FL 33756

3/28/00, 4/21/00

8 Reason for Treatment: Breathing, pulmonary difficulties.9 Albert Soriano, M.D.  
10 1016 Ponce de Leon Blvd  
Belleair, FL 33756

March-April 2000

11 Reason for Treatment: Breathing pulmonary difficulties.12 John Bond, M.D.  
Internal Medicine  
100 McGowan Court  
Hot Springs, AR 71913

1980-June 2000

15 Reason for Treatment: Hypertension, arthritis, anemia, neuropathy, pneumothorax, shortness of breath, mesothelioma.16 John Brunner, M.D.  
17 Patrick A. Dolan, M.D.  
General Surgery  
18 One Mercy Lane, Suite 201  
P.O. Box 6409  
19 Hot Springs, AR 71902

December 1998-August 1999

20 Reason for Treatment: Pneumothorax, thoracoscopy, thoracotomy.21 Jerry M. Herron, M.D.  
Pulmonary Medicine  
22 One Lile Court, Suite 201  
Little Rock, AR 72205

10/18/99

23 Reason for Treatment: Shortness of breath, fatigue24 Dale Klinchloe, M.D.  
Orthopedics  
25 Hot Springs, AR

November 1990, February 1991

26 Reason for Treatment: Knee replacements.27 James Burton, M.D.  
Urologist  
28 Hot Springs, AR

May 1991

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1 Reason for Treatment: TUR      1970 to September 2000

2 Dr. Carson  
Dr. Hill  
3 VA Medical Center  
4300 W. 7<sup>th</sup> Street  
4 Little Rock, AR 72205

5 Reason for Treatment: Physicals, hypertension, arthritis.

6 Dr. S. Metzer, Neurology      1992 to September 2000  
VA Medical Center  
4300 W. 7<sup>th</sup> Street  
Little Rock, AR 72205

8 Reason for Treatment: Neuropathy of feet and legs.

9 Dr. Pelligrenio, Neurology      1993-1994  
10 Hot Springs, AR

11 Reason for Treatment: Neuropathy of feet and legs

12 Air Force Flight Surgeon      1964  
McDill AFB Hospital  
13 Tampa, FL

14 Reason for Treatment: Pleurisy

15 Name/Address of Hospital      Date(s) of Treatment  
16 Morton Plant Hospital      March 2000 to death  
323 Jeffords Street  
17 Clearwater, FL 33756

18 Reason for Hospital Visit: Thoracentesis, mesothelioma

19 Anderson Cancer Center      July 2000  
University of Texas  
20 1515 Holcombe Blvd  
Houston, TX 77030

21 Reason for Hospital Visit: Mesothelioma.

22 H. Lee Moffitt Cancer Center      April 2000, 8/9/00  
23 12902 Magnolia Dr  
Tampa, FL 33612

24 Reason for Hospital Visit: Mesothelioma

25 St. Joseph's Regional Health Center      1990 to September 2000  
300 Werner St.  
26 Hot Springs, AR 71913

27 Reason for Hospital Visit: Knee replacements, pneumothorax, thoracoscopy, thoracotomy, colonoscopy.

28

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1 VA Hospital  
4300 W. 7<sup>th</sup> Street  
2 Little Rock, AR

1970 to September 2000



3 Reason for Hospital Visit: Various X-rays and general physicals.

4 McDill AFB Hospital  
Tampa, FL

1964

5 Reason for Treatment: Pleurisy

6 **RESPONSE TO INTERROGATORY NO. 13:**

7 Plaintiff objects to this interrogatory because it is overbroad, burdensome, and an invasion  
8 of the right to privacy. Plaintiff also objects because this interrogatory seeks expert medical  
9 opinion; plaintiff is not an expert and is not qualified to give medical opinions. Further,  
10 defendants have relevant medical records or plaintiff's attorney will make relevant medical records  
11 available at a mutually convenient time in our office for the defendants' coordinating counsel for  
12 medical discovery, Berry & Berry. Without waiving said objections, plaintiff refers defendants to  
13 her response to Interrogatory No. 12 for information sought here.

14 **RESPONSE TO INTERROGATORY NO. 14:**

15 Plaintiff objects to this interrogatory because it is overbroad, burdensome, and an invasion  
16 of plaintiff's right to privacy. Further, defendants have these medical records or plaintiff's attorney  
17 will make these medical records available at a mutually convenient time in our office for the  
18 defendants' coordinating counsel for medical discovery, Berry & Berry. Without waiving said  
19 objections, plaintiff refers defendants to her response to Interrogatory No. 12 for information  
20 sought here.

21 Re: Results and Conclusions: Plaintiff objects to this part of the interrogatory because it  
22 calls for a medical conclusion which plaintiff is not qualified to give.

23 **RESPONSE TO INTERROGATORY NO. 15:**

24 Plaintiff objects to this interrogatory because it is overbroad, burdensome and that said  
25 information is equally available to defendants. Said information may be obtained by reviewing  
26 decedent's medical records. Further, defendants have these medical records or plaintiff's attorney  
27 will make these medical records available at a mutually convenient time in our office for the  
28 defendants' coordinating counsel for medical discovery, Berry & Berry. Without waiving said

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1 objections, plaintiff refers defendants to her response to Interrogatory No. 12 for  
2 sought here.



3 Re: Results and Conclusions: Plaintiff objects to this part of the interrogatory because it  
4 calls for a medical conclusion which plaintiff is not qualified to give.

5 **RESPONSE TO INTERROGATORY NO. 16:**

6 Plaintiff objects to this interrogatory because it is overbroad, burdensome and that said  
7 information is equally available to defendants. Said information may be obtained by reviewing  
8 decedent's medical records. Defendants have medical records or plaintiff's attorney will make  
9 them available at a mutually convenient time in our office for the defendants' coordinating counsel  
10 for medical discovery, Berry & Berry. As to drugs taken for pulmonary problems, defendants are  
11 referred to decedent's medical records.

12 **RESPONSE TO INTERROGATORY NO. 17:**

13 Plaintiff objects to this interrogatory because it is overbroad, burdensome, an invasion of  
14 plaintiff's right to privacy, irrelevant to the subject matter of this lawsuit and not likely to lead to  
15 admissible evidence. Further, plaintiff's attorney will make any documents regarding decedent's  
16 chest conditions and any other related problems available to defendants at a mutually convenient  
17 time in our office for the defendants' coordinating counsel for medical discovery, Berry & Berry.  
18 Without waiving said objections, plaintiff responds as follows: See pathology report of William  
19 R. Salyer dated October 20, 2000.

20 **RESPONSE TO INTERROGATORY NO. 18:**

21 Plaintiff objects to this interrogatory because it calls for a medical opinion which plaintiff  
22 is not qualified to give. Without waiving this objection, plaintiff responds:

23 (a) Decedent's entire respiratory system; e.g., shortness of breath and severe pain.  
24 Propounding defendants are referred to decedent's medical records and deposition testimony ;  
25 (b) Malignant mesothelioma ;  
26 (c) Decedent began to experience symptoms before April 2000;  
27 (d) Weight loss, and scars on his body as a result of surgical procedures relating to the  
28 diagnosis of mesothelioma;

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- 1       (e)     Entire body and especially the respiratory system;
- 2       (f)     Approximately April 10, 2000;
- 3       (g)     Please see Response to Interrogatory No. 12 above;
- 4       (h)     Not applicable, as this is a wrongful death action.

5       **RESPONSE TO INTERROGATORY NO. 19:**

- 6       (a)     Approximately April 10, 2000;
- 7       (b)     See Response to Interrogatory No. 12 above;
- 8       (c)     Plaintiff objects to this subpart of the interrogatory because it calls for speculation  
9 and a medical conclusion which plaintiff is not qualified to give. Without waiving said objections,  
10 plaintiff responds as follows: Plaintiff does not know the method upon which the doctor made  
11 such a determination, nor is plaintiff sure upon what information the interpretation was based.  
12 Plaintiff refers defendant to decedent's medical records which are equally available to defendant;
- 13       (d)     Plaintiff refers defendants to decedent's medical records, which detail the  
14 information requested and are equally available to defendants. In addition, plaintiff refers  
15 defendants to responses to Interrogatories No. 12 and 13;
- 16       (e)     Members of decedent's immediate family were informed of decedent's medical  
17 condition;
- 18       (f)     Not applicable;
- 19       (g)     See response to Interrogatory No. 16;
- 20       (h)     Yes; and
- 21       (i)     Plaintiff objects to this subpart of this interrogatory to the extent that it asks for  
22 information protected by the attorney work product privilege. As to information not protected by  
23 said privilege, plaintiff responds: Plaintiff refers defendant to the response to Interrogatories  
24 Nos. 12 and 17, for the information sought here. Discovery is continuing.

25       **RESPONSE TO INTERROGATORY NO. 20:**

26       Plaintiff construes this interrogatory to relate only to complaints, symptoms and adverse  
27 reactions that were caused by asbestos or asbestos-containing products. Therefore, plaintiff  
28 responds: No.

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1 **RESPONSE TO INTERROGATORY NO. 21:**

2 Yes. A copy is attached.

3 **RESPONSE TO INTERROGATORY NO. 22:**

4 No.

5 **RESPONSE TO INTERROGATORY NO. 23:**

6 Yes.

REDACTED

7 (a) (1) St. Joseph Hospital, Little Rock, AR;(2) Morton Plant Hospital;

8 (b) (1) Seshagirirao Pemmaraju M.D. (2)Kenneth R. Schroer; M.D.

9 (c) with Berry & Berry; and

10 (d) (1) January 13, 1999 (2) August 30, 2000.

11 **RESPONSE TO INTERROGATORY NO. 24:**

12 Plaintiff objects to this interrogatory because it violates the attorney work product  
privilege. Plaintiff will disclose the names of its experts pursuant to California Code of Civil  
Procedure Section 2034 prior to trial.

15 **RESPONSE TO INTERROGATORY NO. 25:**

16 Plaintiff objects to this interrogatory because it is overbroad, vague and ambiguous.

17 Without waiving said objections, plaintiff responds: No.

18 **RESPONSE TO INTERROGATORY NO. 26:**

19 Yes.

20 **RESPONSE TO INTERROGATORY NO. 27:**

21 (a) 1941-1963.

22 (b) Cigarettes, inhaled; cigars, inhaled;

23 (c) daily;

24 (d) Quit for 5 years. Not habituated to smoking;

25 (e) Smoked socially only;

26 (f) Less than one pack per day; and;

27 (g) Various.

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1 **RESPONSE TO INTERROGATORY NO. 28:**

2 Plaintiff objects to this interrogatory because it calls for speculation. Without waiving said  
 3 objection, plaintiff responds: Yes. 1963. Dr. B. Brasher, Gainesville, FL. Decedent followed his  
 4 advice, and quit smoking permanently.

5 **RESPONSE TO INTERROGATORY NO. 29:**

6 Plaintiff objects to this interrogatory because it is an invasion of privacy, irrelevant, and not  
 7 likely to lead to admissible evidence. Without waiving said objections, plaintiff responds as  
 8 follows: Decedent drank socially.

9 **RESPONSE TO INTERROGATORY NO. 30:**

10 Plaintiff believes the following to be true regarding decedent's employers:

11 <u>Employer/Address</u>	12 <u>Dates</u>	13 <u>Job Title</u>
U.S. Navy	6/4/42- 11/47	Seaman, boson's mate

14 Duties: Decedent did his basic training at San Diego from June to September 1942. He was then assigned to the destroyer *USS Gansevoort* (DD-608) in San Francisco, CA on which he served as a seaman until September 1945. He recalled pulling up all the floor sheeting or tile on the decks when he first boarded the ship, using blow torches, hammers, sandpaper and steel brushes. Decedent's living space was in the stern compartment under the main battery 5 inch anti-aircraft and bombardment guns, and depth charge launchers. When the guns were fired or during a submarine attack, the vibrations shook the asbestos out of the steam pipe overhead lagging leaving dust and fibers over his bunk, blankets and everywhere below.

15 Decedent also recalled asbestos fiber and dust being everywhere in his sleeping compartment while the *Gansevoort* underwent overhaul and refit at Mare Island in approximately 1942, torpedo and depth charge training and shakedown cruise at San Diego Navy Yard 1942, main battery repairs and gun calibration at Pearl Harbor Navy Yard in September 1942, dry dock at Bremerton Navy Yard after the Aleutian Campaign in 1943, more repairs at Pearl Harbor in 1944, and major rip out and repairs of the overhead asbestos-lagging on the steam pipes in decedent's sleeping quarters after the *Ganvoort* was hit and sunk by a kamikaze airplane, and refloated and repaired at Leyte before returning to Pearl Harbor, then Hunters Point for refurbishing May 1945. Decedent recalled working in the lower decks living spaces cleaning and refurbishing the vessel, alongside the Hunters Point shipyard workers, and being exposed to asbestos during this time.

16 After taking leave from September to December 1945, decedent was reassigned January 1946 to the *USS Portsmouth* (CL-102) and served as a boson's mate (first class) until he was honorably discharged in November 1947. Plaintiff claims decedent was exposed to asbestos throughout his Navy service.

25 U.S. Air Force	26 June 1948-April 30, 1963	27 Boatmaster, 1 <sup>st</sup> Sergeant
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28 Duties: Decedent served at the following locations:

29 Crash Boat Squadron	30 June 1948-June 1953	31 Boatmaster
Brooklyn AFB		
Mobile, AL		

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1 22<sup>nd</sup> Crash Boat Squadron  
APO San Francisco, CA.

June 1953-June 1954

Boatmaster



2 Duties: Decedent served on Air Force rescue boats, in Korea, which were deployed when pilots  
3 were shot down. Some of these vessels were converted PT boats. Decedent recalled there was  
4 asbestos insulation on the exhausts and manifolds of these boats' engines which he maintained.

5 Crash Boat Squadron  
Tindell AFB  
Panama City, FL

June 1954-May 1956

Boatmaster

6 Duties: Decedent was transferred to power production for the USAF. He undertook training at the  
7 Nordberg Manufacturing Co. in Milwaukee to learn to operate power station engines. He worked  
8 on a large powerplant engine, and recalled replacing asbestos gaskets, and that the exhausts and  
mufflers were insulated with asbestos.

9 1230<sup>th</sup> AACCS  
RAF Station  
Croughton, England

May 1956-February 1959

1st Sergeant

11 Duties: Decedent operated the power plant used to provide power to the communications  
12 equipment. Decedent recalled working on number of engines at the receiving station. Plaintiff  
claims decedent's exposure to asbestos during these operations.

13 AC&W Squadron  
Winton, Salem N.C.

February 1959-February 1960 1<sup>st</sup> Sergeant

14 Duties: Decedent operated the power plant which had a number of powerplant engines which were  
15 insulated with asbestos. Plaintiff claims decedent's exposure to asbestos during these operations.

16 691<sup>st</sup> Radar Squadron  
Cross City, FL

February 1960-June 1961

1<sup>st</sup> Sergeant

18 666<sup>th</sup> Radar Squadron  
McDill AFB  
Tampa, FL

February 1961-4/30/63

1<sup>st</sup> Sergeant

19 Duties: Decedent transferred out of power plant operations to headquarters, from where he retired.  
20 Plaintiff does not claim decedent's asbestos exposure during this time period.

21 Gatorland Lounge  
Gainesville, FL

May 1963-June 1964

Owner, bartender

23 Kings Food Host  
Gainesville, FL

August-November 1964

Building maintenance

24 University of Florida  
Gainesville, FL

May 1965-May 1967

Laboratory kilns maintenance,  
Heat shields construction.

26 Duties: Decedent built nuclear heat shields and subcritical reactors for graduate students. He also  
performed maintenance on laboratory kilns and other heat related equipment, and used asbestos  
gloves and gauntlets. Plaintiff claims decedent's exposure to asbestos at this employment.

28 Plaintiff refers defendants to decedent's deposition testimony for further information.

Discovery is continuing

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WR GRACE PIQ 60268-0041

1           **RESPONSE TO INTERROGATORY NO. 31:**

2           Plaintiff does not personally know the information requested in subparts (a) through (i) of  
 3           this interrogatory. Therefore, plaintiff bases her response on decedent's answers to personal injury  
 4           interrogatories and his deposition. In both documents, which are equally available to defendants,  
 5           decedent described the nature of his work and exposure to asbestos-containing materials, and also  
 6           named former co-workers]

7           (a)     See Response to Interrogatory No. 30 above. Discovery is continuing;  
 8           (b)     Plaintiff refers defendants to her response to Interrogatory No. 30 above for the  
 9           information sought here. Discovery is continuing;

10          (c)     Yes. Plaintiff refers defendants to her Response to Interrogatory No. 30 above;  
 11          (d)     Yes. Plaintiff refers defendants to her Response to Interrogatory No. 30 above;  
 12          (e)     All types of asbestos-containing products used for ships, aboard ship and in  
 13           shipyards, including but not limited to the following: Pipe covering, pipe insulation, gasket  
 14           materials, block insulation, adhesives, insulating cement, cloth, tape and joint compounds.

15           Decedent and his crewmembers aboard the *USS Gansevoort* and *USS Portsmouth* were regularly  
 16           exposed to a dusty work environment which was created by the use of asbestos-containing  
 17           materials; further decedent worked with asbestos gloves, and gauntlets, and asbestos-containing  
 18           block and asbestos-containing insulation products when he worked at the University of Florida.

19           Decedent and his co-workers were regularly exposed to a dusty work environment which  
 20           was created by the use of asbestos-containing materials.

21           Discovery is continuing;

22          (f)     Mare Island; San Diego Navy Yard; Pearl Harbor Navy Yard; Bremerton Navy  
 23           Yard; Hunters Point Naval Shipyard; University of Florida; and the ships decedent served upon:  
 24           *USS Gansevoort* (9/42-9/45); *USS Portsmouth* (1/46-11/47); University of Florida (5/65-5/67,  
 25           5/68-12/68)

26          (g)     *USS Gansevoort*; *USS Piedmont* (destroyer tender for temporary repairs after the  
 27           Gansevoort was raised from sinking); *USS Portsmouth*;

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WR GRACE PIQ 60269-0042

(h) Decedent recalled Commander John M. Steinbeck on the *USS Gd*

2 Premo was decedent's supervisor at the University of Florida. Discovery is continuing.

3 (i) Plaintiff objects to this subpart of this interrogatory because it is overbroad and  
4 burdensome. Short of having to subpoena the employment records from decedent's employers,  
5 plaintiff is unable to answer this question. Without waiving any objections, plaintiff responds:  
6 Plaintiff does not know the addresses, nor whether any of the individuals with whom decedent  
7 served are deceased. She attaches

8 (a) as Exhibit A a list which includes but is not limited to names of decedent's  
9 crew-members on the *USS Gansevoort*. Decedent did not recall crewmembers with whom he  
10 served on the *USS Portsmouth*:

(b) as Exhibit B a list of individuals with whom decedent served on rescue boats in  
the U.S Air Force;

13 (c) Decedent identified working with Dr. Nils Diaz; Fred Premo, Gainesville, FL;  
14 Joseph Mueller, deceased; John Whiteford; Robert Dalton; George Fogle. at the University of  
15 Plaintiff believes that the employees of the U.S. Navy and U.S. Air Force at the shipyards/stations  
16 in which decedent worked, and the employees of the University of Florida, as well as their  
17 contractors and subcontractors, have such information. At this time, plaintiff has not ascertained  
18 the name of all these individuals, but believes that the personnel records of these employers are  
19 equally available to defendants.

20 Plaintiff further believes that the crew members of *USS Gansevoort* including but not  
21 limited to those individuals listed on Exhibit A hereto, and crewmembers of the *USS Portsmouth*;  
22 and Air Force rescue boats' crews upon which decedent worked including but not limited to those  
23 individuals listed on Exhibit B hereto have such information, as do employees of the shipyards/air  
24 bases and employees of the contractors and/or subcontractors at the shipyards/air bases where  
25 these vessels were constructed, repaired, refurbished and overhauled.

26 Additionally plaintiff believes that employees of the entities that supplied and  
27 manufactured asbestos containing products to decedent's worksites and/or to contractors at his  
28 jobsites have such information.

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1 Plaintiff refers propounding defendants to decedent's deposition testimoni  
2 Discovery is continuing.

3 **RESPONSE TO INTERROGATORY NO. 32:**

4 Not to plaintiff's knowledge; discovery is continuing.

5 **RESPONSE TO INTERROGATORY NO. 33:**

6 Plaintiff does not know the information requested in subparts (a) through (f) of this  
7 interrogatory. Therefore, plaintiff bases her response on decedent's answers to his personal injury  
8 interrogatories and to his deposition. In both documents, which are equally available to  
9 defendants, decedent discusses product identification]

10 (a) Plaintiff refers defendants to her Response to Interrogatory Nos. 30 and 31 above;

11 (b) Plaintiff's counsel herein is informed and believes that based on decedent's  
12 exposures and the years of exposure that the manufacturers included all defendants named herein.

13 These materials include all those products itemized in Response to Interrogatory No. 31 above;

14 (c) Unknown at this time; discovery is continuing;

15 (d) Decedent referred to asbestos as "asbestos";

16 (e) Unknown at this time; discovery is continuing;

17 (f) To plaintiff's knowledge, decedent did not receive any health hazard warning;

18 Plaintiff refers propounding defendants to decedent's deposition testimony for further  
19 information.

20 Discovery is continuing.

21 **RESPONSE TO INTERROGATORY NO. 34:**

22 Plaintiff believes that cartons or other containers of each defendant's product existed.

23 Plaintiff also refers defendants to her Response to Interrogatories Nos. 30 and 33 above.

24 Plaintiff further refers propounding defendants to decedent's deposition testimony.

25 Discovery is continuing.

26 **RESPONSE TO INTERROGATORY NO. 35:**

27 Plaintiff objects to this interrogatory to the extent that it calls for privileged information  
28 that is the work product of plaintiff's attorneys or otherwise requires such disclosure of information

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1 that would constitute a violation of various section 362a stay orders of the Fedel  
 2 Courts. Without waiving said objections, plaintiff responds: Plaintiff's counsel is informed and  
 3 has no reason to believe that decedent was exposed to asbestos products manufactured or sold by  
 4 companies who could have been but were not named as defendants in this action. Discovery is  
 5 continuing.

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6 **RESPONSE TO INTERROGATORY NO. 36:**

7 Plaintiff does not know at this time the exact percentage of exposure to the different  
 8 asbestos-containing materials. Discovery is continuing.

9 **RESPONSE TO INTERROGATORY NO. 37:**

10 Plaintiff objects to this interrogatory because it is overbroad and burdensome. Without  
 11 waiving said objections, plaintiff responds as follows: Plaintiff refers defendants to Réponse to  
 12 Interrogatory No. 31 above, to decedent's deposition testimony; and to his Responses to Joint  
 13 Defense Interrogatories for the information sought here. Additionally, plaintiff refers defendants  
 14 to decedent's employers' personnel records as well as to the personnel records of the contractors  
 15 and subcontractors who were doing work at the locations where decédent worked. Discovery is  
 16 continuing.

17 **RESPONSE TO INTERROGATORY NO. 38:**

18 Plaintiff objects to this interrogatory because it is burdensome and overbroad. Without  
 19 waiving said objection, plaintiff responds: Plaintiff refers defendants to response to Interrogatories  
 20 No. 31 above and to decedent's deposition testimony.

21 Plaintiff believes that the crew members of *USS Gansevoort*, including but not limited to  
 22 those individuals listed on Exhibit A hereto, or the *USS Portsmouth*, and USAF rescue boats on  
 23 which he worked including but not limited to those individuals listed on Exhibit B hereto have  
 24 such information, and of contractors and subcontractors at the shipyards/air bases where these  
 25 vessels were constructed, repaired, refurbished and overhauled. Additionally plaintiff believes that  
 26 employees of the University of Florida including but not limited to Fred Premo, Gainesville, FL;  
 27 Joseph Mueller, deceased; John Whiteford; Robert Dalton; George Fogle, and students including  
 28 but not limited to Dr. Nils Diaz, that supplied and manufactured asbestos containing products to

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1 his worksites and/or to contractors at decedent's jobsites have such information  
2 plaintiff has not ascertained the names of all these individuals, but believes that ~~the persons~~  
3 records of these various entities are equally available to defendants.

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4 Plaintiff believes these individuals may have information regarding the use of asbestos-  
5 containing materials, such as those manufactured, sold, distributed, and/or otherwise supplied by  
6 propounding defendants, at location(s) where plaintiff claims that decedent was exposed to  
7 asbestos.

8 Discovery is continuing.

9 **RESPONSE TO INTERROGATORY NO. 39:**

10 Plaintiff objects to this interrogatory because, to the extent that plaintiff's counsel might  
11 possess such documents, they were obtained from defendants and are therefore equally available to  
12 defendants. Without waiving this objection, plaintiff responds: Plaintiff personally neither saw  
13 nor possessed invoices, bills or statements of any type demonstrating the sale of asbestos-  
14 containing products to decedent's work sites. Plaintiff refers defendants to documents previously  
15 produced in Alameda, San Francisco, and Solano County cases involving Bethlehem Steel , San  
16 Francisco , Mare Island Naval Shipyard and Hunters Point Naval Shipyards Discovery is  
17 continuing.

18 **RESPONSE TO INTERROGATORY NO. 40:**

19 Not to plaintiff's knowledge.

20 **RESPONSE TO INTERROGATORY NO. 41:**

21 Not to plaintiff's knowledge.

22 **RESPONSE TO INTERROGATORY NO. 42:**

23 Not to plaintiff's knowledge.

24 **RESPONSE TO INTERROGATORY NO. 43:**

25 No.

26 **RESPONSE TO INTERROGATORY NO. 44:**

27 (a) Plaintiff had enlistment physicals in both the U.S. Navy and the US Air Force, and  
28 had periodic physicals for ailments when in the services..

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1       (b) Periodic physicals;  
2       (c) Required at enlistment; periodically once in the services  
3       (d) Chest X-rays were included occasionally;  
4       (e) As required;  
5       (f) Plaintiff objects to this subpart of this interrogatory because it calls for a medical  
6 conclusion which plaintiff is not qualified to give;  
7       (g) Services physicians; and;  
8       (h) Not applicable.  
9       Discovery is continuing.

10 **RESPONSE TO INTERROGATORY NO. 45:**

11       No.

12 **RESPONSE TO INTERROGATORY NO. 46:**

13       No.

14 **RESPONSE TO INTERROGATORY NO. 47:**

15       Please refer to Response to Interrogatory No. 45.

16 **RESPONSE TO INTERROGATORY NO. 48:**

17       Not to plaintiff's knowledge.

18 **RESPONSE TO INTERROGATORY NO. 49:**

19       No.

20 **RESPONSE TO INTERROGATORY NO. 50:**

21       Plaintiff objects to this interrogatory because it is irrelevant to the subject matter of this  
22 lawsuit, is unlikely to lead to admissible evidence, and is an invasion of plaintiff's right to privacy.  
23 Without waiving said objections, plaintiff responds: Plaintiff retired in approximately 1986.

24 **RESPONSE TO INTERROGATORY NO. 51:**

25       Plaintiff objects to this interrogatory because it is vague and ambiguous as to the term  
26 "disability pension" and is irrelevant to the subject matter of this lawsuit and not likely to lead to  
27 admissible evidence. Without waiving said objections, plaintiff responds: Not applicable.

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1 **RESPONSE TO INTERROGATORY NO. 52:**

2 No.

3 **RESPONSE TO INTERROGATORY NO. 53:**

4 Not applicable.

5 **RESPONSE TO INTERROGATORY NO. 54:**

6 Plaintiff objects to providing information regarding plaintiff's income after the date of  
 7 decedent's death because it is irrelevant to the subject matter of the instant action and not likely to  
 8 lead to admissible evidence. Plaintiff also objects to providing information regarding decedent's  
 9 income beyond the five years prior to his death because the interrogatory is overbroad,  
 10 burdensome, irrelevant, and not likely to lead to admissible evidence. Without waiving these  
 11 objections, plaintiff responds: For the five years previous to decedent's death, plaintiff responds:  
 12 Decedent testified that since retirement in 1986 his annual income was his USAF pension  
 13 approximately \$6,000 annually, and Social Security approximately \$7200 annually. See  
 14 decedent's deposition transcripts, and the Economic Report of Robert Johnson attached hereto for  
 15 further information regarding these economic losses.

16 **RESPONSE TO INTERROGATORY NO. 55:**

17 At this time, plaintiff does not possess complete records detailing hospital expenses  
 18 incurred as a result of decedent's asbestos-related treatment. Plaintiff is in the process of gathering  
 19 this information. Discovery is continuing.

20 **RESPONSE TO INTERROGATORY NO. 56:**

21 At this time, plaintiff does not possess complete records detailing medical costs (other than  
 22 hospitalization) incurred as a result of decedent's asbestos-related illness. Plaintiff is in the process  
 23 of gathering this information. Discovery is continuing.

24 **RESPONSE TO INTERROGATORY NO. 57:**

25 Plaintiff objects to this interrogatory because it violates the collateral source rule, is  
 26 irrelevant to the subject matter of this lawsuit, and is not likely to lead to admissible evidence.

27 Please refer to Judge McKibben's ruling as to *Elnora Bell v. Fibreboard Corporation* (December  
 28 8, 1983), Case No. 568497-7 as a case on point concerning this interrogatory.

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1 **RESPONSE TO INTERROGATORY NO. 58:**

2 Rhodes Funeral Directors, Inc., 800 East Druid Rd. Clearwater, FL 33756.

3 **RESPONSE TO INTERROGATORY NO. 59:**

4 Yes.

5 (a) March 29, 2001; and

6 (b) Florida National Cemetery, Bushnell, Florida

7 **RESPONSE TO INTERROGATORY NO. 60:**

8 No.

9 **RESPONSE TO INTERROGATORY NO. 61:**

10 Funeral and cemetery expenses were in excess of \$8,000. Copies of statements will be  
11 provided to co-ordinating counsel Berry & Berry.

12 **RESPONSE TO INTERROGATORY NO. 62:**

13 Plaintiff objects to this interrogatory because it is overbroad, violates the collateral source  
14 rule, is irrelevant to the subject matter of this lawsuit and is not likely to lead to admissible  
15 evidence. Without waiving said objections, plaintiff responds as to the Workers' Compensation:  
16 No.

17 **RESPONSE TO INTERROGATORY NO. 63:**

18 Not applicable.

19 **RESPONSE TO INTERROGATORY NO. 64:**

20 Plaintiff objects to this interrogatory because it is vague and ambiguous. Without waiving  
21 said objections, plaintiff responds: Other than the instant action and for decedent's asbestos-  
22 related mesothelioma, no.

23 **RESPONSE TO INTERROGATORY NO. 65:**

24 Plaintiff objects to this interrogatory because it constitutes an invasion of privacy and is  
25 irrelevant to the subject matter herein and not likely to lead to admissible evidence.

26 //

27 //

28 //

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1 **RESPONSE TO INTERROGATORY NO. 66:**

2 Plaintiff objects to this interrogatory because it is overbroad, ambiguous, a violation of the  
3 collateral source rule, invasion of privacy, a violation of confidentiality agreements and not likely  
4 to lead to admissible evidence.

5 **RESPONSE TO INTERROGATORY NO. 67:**

6 Plaintiff refers defendants to her Response to Interrogatory No. 66 above.

7 **RESPONSE TO INTERROGATORY NO. 68:**

8 Plaintiff objects to this interrogatory because it violates the attorney work product  
9 privilege. Without waiving this objection, plaintiff responds: Plaintiff refers defendants to  
10 Responses to Interrogatory Nos. 30, 31 and 38 herein. Discovery is continuing.

11 **RESPONSE TO INTERROGATORY NO. 69:**

12 Plaintiff objects to this interrogatory because it violates the attorney work product  
13 privilege. Plaintiff further objects to this interrogatory because it is vague, ambiguous and  
14 unintelligible so as to make a response impossible without speculation as to the meaning of the  
15 question. Without waiving said objections and interpreting this question to mean those tangible  
16 items which specifically evidenced decedent's exposure to asbestos-containing products directly,  
17 plaintiff responds as follows: Other than medical records, plaintiff has located no such documents  
18 at this time. Plaintiff further refers defendants to defendants' responses to discovery propounded  
19 under the *In Re: Shipyard and Applicator Consolidated for Discovery* case caption and *In Re:*  
20 *Complex Litigation* case caption, to all documents, if any, produced in and

21 v. ACandS, Inc., Alameda County Superior Court No. 830506-4 , to  
22 decedent's deposition transcript and to Interrogatory No. 31 herein. Discovery is continuing.

23 **RESPONSE TO INTERROGATORY NO. 70:**

24 Yes.

25 **RESPONSE TO INTERROGATORY NO. 71:**

26 See attached records.

27 **RESPONSE TO INTERROGATORY NO. 72:**

28 Yes.

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